Patricia Booker

| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | | Application or Docket Number | | | |
|---|--|---|---|-----------------------|--------------|-------------------------|---------|---------------------|------------------------------|-------------------------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENT | TITY | OTHER THAN OR SMALL ENTITY | | |
| U.S. NATIONAL STAGE FEES | | | | | | · | 1 | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | | | | | 1 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | - | | | · · · · · · · · · · · . | 1 | EXAM. FEE | | | EXAM. FEE | 200 |
| SEARCH FEE | | | · | | | | 1 | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | min | us 100 = | / 50 = | | | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 26 minus 20 = * | | | | | X \$ 25 = | | OR | X \$ 50 = | 300 |
| INDEPENDENT CLAIMS | | | ₫ m | inus 3 = | * | 7 | 1 | X \$ 100 = | | OR | X \$ 200 = | 20 |
| MULTIPLE DEPENDENT CLAIM PRE | | | ESENT . | | | | 1 | + \$ 180 = | : | OR | + \$ 360 = | |
| * If | the difference | in column 1 is | less than zero | o, enter "(| o" in co | lumn 2 | .] | TOTAL | | OR | TOTAL | 1200 |
| Α. | · | (Column 1) CLAIMS REMAINING AFTER | (Column 2) (Column 3) HIGHEST NUMBER PRESENT PREVIOUSLY EXTRA | | |] | SMALL E | ADDI- TIONAL | OR | OTHER I SMALL E RATE | ADDI- TIONAL | |
| AMENDMENT | Total | * | Minus | PAID ** | FOR | = | 1 | X \$ 25 = | FEE | OR | X \$ 50 = | FEE |
| | Independent | * | Minus | *** | | = | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| | | ENTATION OF N | I | ENDENT | CLAIM | | 1 1 | + \$ 180 = | | OR | | |
| | | | | | | |] | TOTAL ADDIT. | | OR | + \$ 360 = | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| AME | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | • | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |